

FOR IMMEDIATE RELEASE March 1, 2021

Dallas County Reports 751 New Positive 2019 Novel Coronavirus (COVID-19) Cases and 42 Deaths, Including 83 Probable Cases

DALLAS -- As of 12:00 pm March 1, 2021 Dallas County Health and Human Services is reporting 751 additional positive cases of 2019 novel coronavirus (COVID-19) in Dallas County, 668 confirmed cases and 83 probable cases. There is a cumulative total of 245,946 confirmed cases (PCR test). There is a cumulative total of 35,209 probable cases (antigen test). A total of 2,993 Dallas County residents have lost their lives due to COVID-19 illness. Dallas County has transitioned from Sunday reporting and will now report those case and fatality numbers with the Monday data.

Dallas County Health and Human Services is providing initial vaccinations to those most at risk of exposure to COVID-19 and 45,643 first doses of COVID-19 vaccine have been administered at the Fair Park mega-vaccine clinic, which started operations on Monday, January 11. Dallas County is currently administering second doses.

The additional deaths being reported today include the following:

- A woman in her 40's who was a resident of the City of Dallas. She had been hospitalized and had underlying high risk health conditions.
- A man in his 50's who was a resident of the City of Dallas. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 50's who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 50's who was a resident of the City of Irving. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 50's who was a resident of the City of Dallas. She had been hospitalized and had underlying high risk health conditions.
- A woman in her 50's who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 50's who was a resident of the City of Glenn Heights. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 50's who was a resident of the City of Garland. He had been hospitalized and had underlying high risk health conditions.
- A woman in her 60's who was a resident of the City of Cedar Hill. She had been hospitalized and had underlying high risk health conditions.
- A woman in her 60's who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 60's who was a resident of the City of Dallas. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 60's who was a resident of the City of Dallas. She expired at home and had underlying high risk health conditions.
- A man in his 60's who was a resident of the City of Dallas. He had been critically ill in an area hospital and did not have underlying high risk health conditions.

- A man in his 60's who was a resident of a long-term care facility in the City of Grand Prairie. He expired in hospice and had underlying high risk health conditions.
- A woman in her 60's who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 60's who was a resident of the City of Carrollton. He expired in an area hospital ED and had underlying high risk health conditions.
- A woman in her 60's who was a resident of the City of Richardson. She expired at home and had underlying high risk health conditions.
- A woman in her 60's who was a resident of the City of Irving. She expired at home and had underlying high risk health conditions.
- A man in his 60's who was a resident of the City of Desoto. He had been hospitalized and had underlying high risk health conditions.
- A man in his 60's who was a resident of the City of Dallas. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 60's who was a resident of the City of Dallas. She had been critically ill in an area hospital and did not have underlying high risk health conditions.
- A woman in her 60's who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 60's who was a resident of the City of Grand Prairie. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 60's who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 70's who was a resident of the City of Dallas. He had been hospitalized and had underlying high risk health conditions.
- A woman in her 70's who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 70's who was a resident of the City of Wilmer. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 70's who was a resident of the City of Dallas. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 70's who was a resident of the City of Dallas. She expired in hospice and had underlying high risk health conditions.
- A woman in her 70's who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 70's who was a resident of the City of Cedar Hill. She had been hospitalized and had underlying high risk health conditions.
- A woman in her 70's who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 70's who was a resident of the City of Dallas. She had been hospitalized and had underlying high risk health conditions.
- A woman in her 80's who was a resident of the City of Duncanville. She expired at home and had underlying high risk health conditions.
- A man in his 80's who was a resident of the City of Rowlett. He had been hospitalized and had underlying high risk health conditions.
- A woman in her 80's who was a resident of a long-term care facility in the City of Dallas. She expired in a facility and had underlying high risk health conditions.
- A man in his 80's who was a resident of the City of Mesquite. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 80's who was a resident of the City of Garland. He had been hospitalized and did not have underlying high risk health conditions.

- A man in his 80's who was a resident of the City of Dallas. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 80's who was a resident of the City of Dallas. He had been critically ill in an area hospital and did not have underlying high risk health conditions.
- A woman in her 80's who was a resident of the City of Dallas. She expired in an area ED and had underlying high risk health conditions.
- A woman in her 90's who was a resident of a long-term care facility in the City of Dallas. She had been hospitalized and had underlying high risk health conditions.

Four cases of the SARS-CoV-2 variant B.1.1.7 have been identified in residents of Dallas County who did not have recent travel outside of the US. The provisional seven-day average of daily new confirmed and probable cases (by date of test collection) for CDC week 7 was **226**, which is a rate of **8.6** daily new cases per 100,000 residents. Case reporting for this week ending 2/20/21 was likely significantly impacted by reduced testing due to the severe weather conditions in Texas. The percentage of respiratory specimens testing positive for SARS-CoV-2 remains high, with **16.0%** of symptomatic patients presenting to area hospitals testing positive in week 7 (week ending 2/20/21).

During the past 30 days, there were 4,098 COVID-19 cases in school-aged children and staff reported from 650 separate K-12 schools in Dallas County. An additional death of a teacher in a K-12 school from COVID-19 was confirmed today. A total of 466 children in Dallas County under 18 years of age have been hospitalized since the beginning of the pandemic, including 37 patients diagnosed with Multisystem Inflammatory Syndrome in children (MIS-C). Over 80% of reported MIS-C cases in Dallas have occurred in children who are Hispanic or Latino or Black.

There are currently 68 active long-term care facility outbreaks. A cumulative total of 4,189 residents and 2,324 healthcare workers in long-term facilities in Dallas have been diagnosed with COVID-19. Of these, 950 have been hospitalized and 608 have died. About 22% of all deaths reported to date have been associated with long-term care facilities. Ten outbreaks of COVID-19 in congregate-living facilities (e.g. homeless shelters, group homes, and halfway homes) have been reported in the past 30 days. A cumulative total of 394 residents and 196 staff members in congregate-living facilities in Dallas have been diagnosed with COVID-19.

Of all confirmed cases requiring hospitalization to date, more than two-thirds have been under 65 years of age. Diabetes has been an underlying high-risk health condition reported in about a third of all hospitalized patients with COVID-19. New cases are being reported as a daily aggregate, with more detailed summary reports updated Tuesday and Friday evenings are available at: https://www.dallascounty.org/departments/dchhs/2019-novel-coronavirus/daily-updates.php.

Local health experts use hospitalizations, ICU admissions, and ER visits as three of the key indicators in determining the COVID-19 Risk Level (color-coded risk) and corresponding guidelines for activities during our COVID-19 response. Due to weekend reporting, new data will be available on Tuesday, March 2, 2021.

"Today we report 751 new cases and 42 additional deaths. While the number of deaths remain high, the number of cases and hospitalizations continue to trend lower. This has led some people to believe that they can relax wearing their masks, maintaining distance, and avoiding crowds. This is a mistake. In order for us to reach herd immunity as quickly as possible and get to the 'new normal,' the Parkland Center for Clinical Innovation requires four things to happen.

The first is that we maintain the science and fact-based practices that helped to keep us protected from Covid-19 before the vaccine arrived. This includes masking, social distancing, avoiding crowds, good hygiene, and foregoing get-togethers for the time being.

Second, it requires the vaccine that is currently being diverted away from Dallas County and Tarrant County to be restored. Third, it requires the vaccine the federal government is currently providing to us to continue and for those operations to grow.

Finally, it requires everyone who is eligible for a vaccine to register in as many places as they are willing to drive and to get the vaccine as soon as possible. The best vaccine for you is the vaccine that is first available. They are all highly effective and all have virtually no long-term side effects based on the studies before the FDA approved their use and based on their use in the field.

Approximately 13.5 percent of the Dallas County population has had their first shot and seven percent have had their second shot. We must continue vaccinating and not lose our resolve to make those small sacrifices that are necessary to win the fight against Covid-19. We're all in this together and we will defeat it together," said Dallas County Judge Clay Jenkins.

All Dallas County COVID-19 Updates and Information can be found here:

https://www.dallascounty.org/covid-19/ and all guidance documents can be found here: https://www.dallascounty.org/covid-19/guidance-health.php

Specific Guidance for the Public:

- Dallas County COVID-19 Related Health Guidance for the Public
- Dallas County Measures for Protecting An Institution's Workforce from COVID-19 Infection: Employer/Employee Guidance
- Dallas County Guidance for Individuals at High-Risk for Severe COVID-19

The Centers for Disease Control and Prevention (CDC) recommends taking everyday preventive actions to help prevent the spread of respiratory diseases, including:

- Avoid close contact outside your home: Put 6 feet of distance between yourself and people who don't live in your household.
- Cover your mouth and nose with a cloth face cover when around others and continue to keep about 6 feet between yourself and others. The cloth face cover is not a substitute for social distancing.
- Stay home when you are sick, except to seek medical care
- Wash your hands often and with soap and water for at least 20 seconds and help young children to do the same. If soap and water are not available, use an alcohol-base hand sanitizer with at least 60% alcohol.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people who are sick.
- Clean and disinfect frequently touched objects and surfaces daily using a regular household cleaning spray or wipes.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash. If you do not have a tissue, use your sleeve, not your hands. Immediately wash your hands.
- Monitor your health daily. Be alert for symptoms. Take your temperature and follow CDC guidance if symptoms develop.

Additional information is available at the following websites:

- CDC: <u>https://www.cdc.gov/coronavirus/2019-ncov/index.html</u>
- CDC Travel Information: <u>https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html</u>
- DSHS: <u>https://dshs.texas.gov/coronavirus/</u>
- DCHHS: <u>https://www.dallascounty.org/departments/dchhs/2019-novel-coronavirus.php</u>

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